

SECTION 01 10 00

OSHA, SAFETY AND HEALTH REQUIREMENTS

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PART 1 OSHA Requirements

1.1 General

- A. Contractors are required to comply with the Occupational Safety and Health Act of 1970. This will include the safety and health standard found in Code of Federal Regulations (CFR) 1910 and 1926. Copies of those standards can be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C., 20420.
- B. In addition, Contractor shall be required to comply with other applicable Medical Center policies and safety regulations. These policies and regulations will be presented to the Contractor at the pre-construction meeting. Each of the Contractor's employees will be required to read the statement of policies and regulations, and sign an acknowledgment that such policies and regulations are understood.
- C. The Contractor shall submit a copy of their Safety Plan to the Contracting Officer Technical Representative for review prior to the commencement of work, as it pertains to the general scope of work for this construction project.
- D. Contractors involved with the removal, alteration or disturbance of asbestos-type insulation or materials or lead paint shall be required to comply strictly with the regulations found in CFR 1910.1001 and the appropriate Environmental Protection Agency (EPA) lead regulations regarding disposal of asbestos or lead paint. Assistance in identifying asbestos or lead can be requested from the Medical Center's Industrial Hygienist and the Project Engineer.
- E. Contractors entering locations of asbestos contamination or lead paint residue (i.e., pipe, basements, walls, windows) shall be responsible for providing respiratory protection to their employees and ensuring respirators are worn in accordance with the Occupational Safety and Health Administration (OSHA) [CFR 1910.1001(g)]. Employees entering these areas will be medically evaluated and properly fit-tested for their respirators. Asbestos-or lead paint-contaminated areas shall be defined on project drawings. The minimum equipment requirements will be a half-mask air-purifying respirator equipped with high efficiency filters and disposable coveralls, or as determined by air monitoring results.
- F. Contractor, along with other submittals and at least two weeks prior to bringing any materials on-site, shall submit a complete list of chemicals the Contractor will use and Material Safety Data Sheets (MSDS) for all hazardous materials as defined in OSHA 1910.1200(d), Hazard Determination. Contracting Officer shall have final approval of all materials brought on site.
- G. The Contractor shall be held solely responsible for the safety and health of their employees. The Contractor shall also be held responsible for protecting the health and safety of the VA Community (patients, staff, and visitors) from the unwanted effects of construction. VA staff will monitor the Contractor's performance in complying with all safety and health aspects of the project. Severe or constant

violations may result in an immediate work stoppage or request for a Compliance Officer from the Occupational Safety and Health Administration.

- H. During all phases of demolition, construction and alterations, Contractors shall understand and strictly follow National Fire Protection Association (NFPA®) 241 - 2004 Edition, Standard for Safeguarding Construction, Alteration and Demolition Operations. The Medical Center's Safety and Occupational Health Specialist or Industrial Hygienist will closely monitor the work area for compliance. Appropriate action will be taken for non-compliance.

PART 2 Specific VA Medical Center Fire and Safety Policies, Procedures & Regulations

Refer Also to: Section 01 00 00 GENERAL REQUIREMENTS
Article 1.6 Fire Safety Precautions.

2.1 Introduction

- A. The safety and fire protection of patients, employees, members of the public and government is one of continuous concern to this Medical Center.
- B. Contractors, their supervisors and employees shall comply with Medical Center policies to ensure the occupational safety and health of all. Failure to comply may result in work stoppage.
- C. While working at this Medical Center, Contractors are responsible for the occupational safety and health of their employees. Contractors shall comply with the applicable OSHA standards found in 29 CFR 1910 for general industry and 29 CFR 1926 for construction. Failure to comply with these standards may result in work stoppage and a request to the Area Director of OSHA for a Compliance Officer to inspect your work site.
- D. Contractors shall comply with the requirements found in the National Fire Protection Association (NFPA®) 241 - 2004 Edition, Standard for Safeguarding Construction, Alteration and Demolition Operations, and NFPA® 51B - 2003 Edition, Standard for Fire Prevention Fire Prevention During Welding, Cutting, and Other Hot Work.
- E. Questions regarding occupational safety and health issues can be addressed to the Guy Jessee, VA Medical Center Safety and Occupational Health Specialist at his office (509) 525-5200 ext. 22848 or by cell phone (509) 240-6991.
- F. Smoking is not permitted in any interior areas of the Medical Center, including all interior stairwells, tunnels, construction and/or service/maintenance sites, nor within distance where the smoke may enter into a building through a window or doorway. (*Note: This includes interior posted patient smoking areas, if applicable*). Compliance with this policy by your direct and subcontracted labor force is required and violations are subject to a federal fine by the VA Police.
- G. The Contractor shall appoint a Competent Person: (OSHA Definition) One who is capable of identifying existing or predictable hazards in the surroundings and

working conditions which are unsanitary, hazardous or dangerous to employees, and who has the authorization to take prompt corrective measures to eliminate them. The Contractor's Competent Person shall be directly responsible for the health and safety of their employees and the protection of the work environment, including Sub-Contractors. All Contractor and Sub-Contractor personnel are responsible for compliance with applicable local, state, federal, VA safety rules and health regulations.

H. USE OF EXPANDABLE FOAM SEALANT IS PROHIBITED UNLESS APPROVED BY RESIDENT ENGINEER.

- I. All Contractors shall have attended a minimum of a 10 - hour OSHA Construction Safety course, or equivalent to their specific trade. Exemptions can be made if approved by the CO.

1. SUBMITTALS

The Contractor shall supply the VA with current documentation of the Contractors Safety Plan, Contractors Safety Training, Names, Dates, and Type of Course.

2.2 Hazard Communication

- A. Contractors shall comply with OSHA Standard 29 CFR 1926.59, Hazard Communication.
- B. Contractors shall submit to the VA Safety Officer, copies of MSDS covering all hazardous materials to which the Contractor and VA employees are exposed.
- C. Contractors shall inform the Safety Officer of the hazards to which VA personnel and patients may be exposed.
- D. Contractors shall have a written Hazard Communication Program available at the construction site, which details how the Contractor will comply with 29 CFR 1926.59.

2.3 Fires

All fires must be reported. In the event of a fire in your work area, use the nearest pull box station, and notify Medical Center staff in the immediate area.

Emergency notification can also be accomplished by dialing ext. 22222, from a station phone, be sure to give the exact location from where you are calling and the nature of the emergency.

If you use a cell phone to call 911, be sure to give Operator the exact location from where you are calling and the nature of the emergency.

If a Contractor experiences a fire that was rapidly extinguished by your staff, you still must notify the Safety Officer (509) 525-5200 ext 22848 or cell (509) 240-6991 within an hour of the event so that an investigation of the fire can be accomplished.

2.4 Fire Alarms, Smoke Detection and Sprinkler System

Existing fire protection systems including fire alarm systems, smoke detection systems, and sprinkler systems shall not be impaired during construction, except for devices in the immediate construction areas vacated by VA. Installation of sprinkler systems, standpipe systems, fire hydrants, and fire alarm systems, shall be given priority and placed into service as soon as practical.

If the nature of your work requires the deactivation of the fire alarm, smoke detection or sprinkler system, you must notify the Safety Office. Notification must be made well in advance so that ample time can be allowed to deactivate the system and provide alternative measures for fire protection. Under no circumstance is a Contractor allowed to deactivate any of the fire protection systems in this Medical Center.

2.5 Smoke Detectors

All necessary precautions shall be taken by the Contractor to prevent accidental operation of any existing smoke detectors by minimizing the amount of dust generated in the vicinity of any smoke detectors. False alarms will not be tolerated. You are required to be familiar with the location of the smoke detectors in your work area.

When performing cutting, burning or welding or any other operations that may cause smoke or dust, you must take steps to temporarily cover the smoke detectors in order to prevent false alarms.

Failure to take the appropriate action will result in the Contracting Officer assessing actual costs for government response for each false alarm that is preventable. Prior to covering the smoke detectors, the Contractor shall notify the Safety Officer. The Contractor will also notify the Safety Officer when the covers are removed.

2.6 Hot Work Permit

- A. Hot work is defined as operations including, but not limited to, cutting, welding, thermal welding, brazing, soldering, grinding, thermal spraying, thawing pipes or any similar situation. If such work is required, whenever possible the Contractor shall notify the project manager no less than one day in advance of such work. The project manager will inspect the work area and issue a Hot Work Permit, authorizing the performance of such work.
- B. All hot work will be performed in compliance with the Medical Center's policy regarding Hot Work Permits and NFPA[®] 241 - 2004 Edition, Standard for Safeguarding Construction, Alteration and Demolition Operations, and NFPA[®] 51B - 2003 Edition, Standard for Fire Prevention Fire Prevention During

Welding, Cutting, and Other Hot Work, and applicable OSHA standard. A hot work permit will only be issued to individuals familiar with these regulations.

- C. A Hot Work Permit will be issued only for the period necessary to perform such work. In the event the time necessary will exceed one day, a Hot Work Permit may be issued for the period needed; however, the Contractor Construction Superintendent shall inspect the area daily. Hot Work Permit will apply only to the location identified on the permit. If additional areas involve hot work, then additional permits must be requested.
- D. Contractors shall not be allowed to perform hot work processes without the appropriate permit.
- E. Any work involving the Medical Center's fire protection system will require 24-hour notification. Under no circumstance, will the Contractor or employee attempt to alter or tamper with the existing fire protection system.
- F. The project manager will be notified within 30 minutes of the completion of all hot work to perform an inspection of the area to confirm that sparks or drops of hot metal are not present.
- G. Precautions to be taken
 - Sprinklers are in service where installed
 - Cutting and welding equipment in good repair
 - Within 10.668 m (35 feet); floors swept clean of combustible, no combustible material or flammable liquids, all wall and floor openings covered, and covers suspended beneath work to collect sparks
 - When working on enclosed equipment and in confined space, equipment and area is free of flammable vapors
 - Fire watch provided during and 30 minutes after operation (60 minutes for torch applied roofing operations)
 - Portable fire extinguisher with adequate rating available in the immediate vicinity
 - Standpipe system in service where installed
 - Protection of any sprinkler heads when hot work is in close proximity
 - Smoking prohibited in immediate vicinity
 - Non-combustible shields provided when hot work is done near combustible walls, partitions, floors, roofs
 - Prohibition of hot work on pipes contacting combustible walls
 - Personnel trained in use of equipment including portable fire extinguishers and sounding a fire alarm
 - Final check-up conducted after 30 minutes

2.7 Temporary Enclosures and Partitions

A partition is a rigid surface enclosure. A barrier is a non-rigid enclosure. Temporary construction partitions or barriers of noncombustible materials shall be installed as

required to provide a separation between the areas that are described in phasing requirements and adjoining areas that are occupied by Department of Veterans Affairs (VA) personnel or patients.

Only non-combustible materials will be used to construct temporary enclosures or barriers at this Medical Center. Plastic materials and fabrics used to construct dust barriers must conform to NFPA[®] 701 – 2004 Edition, Standard Methods of Fire Tests for Flame Propagation of Textiles and Films. Partitions and barriers shall be sealed to existing building surface to prevent construction dust from entering adjoining non-constructions areas of buildings.

- a. The partitions shall be constructed of either gypsum board or treated plywood (flame spread rating of 25 or less in accordance with ASTM E84) on both sides of wood or steel studs. The partitions shall extend through suspended ceilings to the floor slab or roof above. The partitions shall be cut to fit around pipes, ducts, conduit, joists, etc. The penetrations shall be sealed with sealant, or mineral fiber insulation. Joints shall be taped and sealed. Doors in the partitions shall be solid core wood doors and shall be provided with self-closing devices. Clearance between the doors and frame or partition shall not exceed 3 mm (1/8 inch); door undercuts shall not exceed 19 mm (3/4 inch).
- b. When temporary partitions separating occupied areas from construction areas coincide with, or intersect with: exit passageways, horizontal exits, stair shafts, exit enclosures, smoke barriers, fire barriers enclosing hazardous areas, or any other type of partition or assembly that is required by NFPA[®] 101 - 2006 Edition, Life Safety Code^{® to} have a fire-resistance rating, the integrity of the existing fire-rated construction shall be maintained at all times during construction.
- c. When it is necessary to remove portions of, or an entire fire-rated assembly that is to remain as part of the completed project, the removed construction shall be replaced by an assembly with an equivalent or higher fire-resistance rating. Replacement shall be given priority over other construction features.
- d. Penetrations of existing fire-rated assemblies resulting from construction operations shall be sealed with a through-penetration fire stop system that is listed for protection of the penetrating item and the type of barrier penetrated.
EXPANDABLE FOAM SHALL NOT BE USED FOR ANY WORK WITHOUT APPROVAL OF THE CO.

2.8 Flammable Liquids

All flammable liquids shall be handled, stored, and used in accordance with NFPA[®] 30 - 2008 Edition, Flammable and Combustible Liquids Code. All flammable liquids will be kept in approved safety containers. Only the amount necessary for your immediate

work will be allowed in the building. Flammable liquids must be removed from the building at the end of each day.

2.9 Compressed Gas Cylinders

Compressed gas shall be secured in an upright position at all times. A suitable cylinder cart will be used to transport compressed gas cylinders. Only those compressed gas cylinders necessary for immediate work will be allowed in occupied buildings. All other compressed gas cylinders will be stored outside of buildings in a designated area. Contractors shall comply with applicable standards compressed gas cylinders found in 29 CFR 1910 and 1926 (OSHA).

2.10 Internal Combustion Engine-Powered Equipment

Equipment powered by an internal combustion engine (such as saws, compressors, generators, etc.) will not be used in an occupied building. Special consideration may be given for unoccupied buildings only if the OSHA and NFPA requirements have been met.

2.11 Powder-Activated Tools

The operator of powder-activated tools shall be trained and certified to use them. Powder-activated tools will be kept secured at all times. When not in use, the tools will be locked up. When in use, the operator shall have the tool under his immediate control.

2.12 Tools

- A. Under no circumstances, will equipment, tools and other items of work to be left unattended for any reason. All tools, equipment and items of work shall be under the immediate control of your employee.
- B. If for some reason, a work area must be left unattended, then tools and other equipment must be placed in an appropriate box or container and locked. All tool boxes, containers or any other device used for the storage of tools and equipment will be provided with a latch and padlock, and shall be kept locked at all times, except for putting in and removing tools.
- C. All doors to work areas shall be closed and locked at all times. Failure to comply with this policy will be considered a violation of VA Regulations 1.218(b), Failure to comply with signs of a directive and restrictive nature posted for safety purposes, and subject to a \$50.00 fine.

Subsequent similar violations may result in both imposition of such a fine as well as the Contracting Officer taking action, under the contract's Accident Prevention Clause [Federal Acquisition Regulation (FAR) 52.236-13] to suspend all contract work until violations may be satisfactorily resolved, or under FAR 52.236-5, Material and Workmanship Clause, to remove from the worksite any personnel

deemed by the Contracting Officer to be careless to the point of jeopardizing the welfare of facility patients or staff.

- D. You must report to the VA Police Department, (509) 525-5200 ext. 22534 and to the Contracting Officer, any tools or equipment that is missing.
- E. Tools and equipment found unattended will be confiscated and removed from the work area.

2.13 Ladders

Ladders shall not be left unattended in an upright position. Ladders shall be attended at all times or taken down, and chained securely to a stationary object.

2.14 Scaffolds

All scaffolds shall be attended at all times. When not in use, an effective barricade (fence) shall be erected around the scaffold to prevent use by unauthorized personnel (Reference OSHA 1926, Subpart L).

2.15 Excavations

The Contractor shall comply with OSHA 1926, Subpart P. An OSHA Competent Person must be on site during the excavation. The Contractor shall coordinate with the project engineer and utility companies prior to the excavation to identify underground utilities tanks, etc. All excavations left unattended shall be provided with a barricade suitable to prevent entry by unauthorized persons.

2.16 Storage

You must make prior arrangements with the project engineer for the storage of building materials. Storage shall not be allowed to accumulate in the Medical Center buildings.

2.17 Trash and Debris

The Contractor shall remove all trash and debris from the work area on a daily basis. Trash and debris shall not be allowed to accumulate inside or outside of the buildings. The Contractor shall be responsible for making arrangements for removal of trash from the Medical Center facility.

2.18 Protection of Floors

It may be necessary at times to take steps to protect floors from dirt, debris, paint, etc. A tarp or other protective covering may be used. However, the Contractor shall maintain a certain amount of floor space for the safe passage of pedestrian traffic. Common sense must be used in this matter.

2.19 Signs

The Contractor shall install 8.5 x 11 inch “Construction Area - Authorized Personnel Only” signs at all access points to construction area. Signs must be placed at the entrance to work areas warning people of your work. Signs shall be suitable for the condition of the work. Small pieces of paper with printing or writing are not acceptable. The VA Medical Center (VAMC) Safety Officer, Contracting Officer or Project Manager can be consulted in this matter.

2.20 Accidents and Injuries

Contractors shall report all accidents and injuries involving their employees IAW Code of Federal Regulations (CFR) 1910 and 1926, and to the VA Safety Officer.

2.21 Infection Control

Contractors shall control the generation of dust and the contamination of patient care surfaces, supplies and equipment. The Infection Control Program should be an active part of any site construction activity, regardless of how minor the project may be. It is vitally important to the facility, patients, staff and construction personnel that everyone be oriented to the facility Infection Control Policy.

Generation of dust is of major concern within staff and especially in patient occupied buildings. Where operations involve the generation of dust, all efforts will be directed at reducing airborne generated dust to the lowest level feasible. This may be accomplished by a number of methods.

These may include but are not limited to misting the area with water, or use of tools attached to high efficiency particulate air (HEPA) filtering vacuums. Where large amounts of materials may be disturbed, resulting in airborne dust, establishment of full ceiling-to-floor plastic barriers may be required.

During demolition phases of the construction:

- A. The construction area shall be under negative pressure when required, ensuring there is an appreciable flow of clean air from the VA-occupied portion of the facility into the construction area. The airflow shall be sufficiently strong enough to draw in the plastic door flaps commonly located at the construction entrance or at the specific site within the construction area.
- B. Construction debris being transported through the VA-occupied portion of the facility shall be covered and/or wetted.
- C. Construction employees shall remove dust-laden clothing before entering the VA-occupied portion of the facility.
- D. Carpet/sticky mats shall be placed at all construction entrances, and be satisfactorily maintained so as to minimize the tracking of dust into the VA-occupied portion of the facility.

- E. Dry sweeping of dust and debris is not to be performed.
- F. The following area(s) are classified as to the applicable infection control class. All appropriate measures listed shall be complied with.

For this Project, the Contractors representative will review with the CO and the Infection Control Practitioner, the **INFECTION CONTROL CONSTRUCTION, RISK ASSESSMENT AND COMPLIANCE MONITOR** matrix as is included as Attachment A at the end of this Section, to determine the scope and depth of safety, infection control, and security interventions appropriate for this construction.

The classifications for the Each area and phase of construction, will be determined and the Contractor will take all necessary steps for each of the independent classes as identified below

Bldg/Room	Infection Control Class
Building 74, All Areas	

Description of Required Infection Control Precautions *by Class*

Class I:

1. Execute work by methods to minimize raising dust from construction operations.
2. Immediately replace a ceiling tile displaced for visual inspection.
3. Traffic: Decrease exposure of patients to construction.
4. Water: If necessary, schedule interruptions during low activity.

Class II: In addition to points for Class I:

1. Provide active means to prevent airborne dust from dispersing into the atmosphere.
2. Water mist work surfaces to control dust while cutting.
3. Seal unused doors with duct tape.
4. Block off and seal air vents.
5. Place walk-off mats at work areas. Mats must be kept wet with amended water during the work hours to prevent tracking of construction dust into surrounding areas.
6. Seal or isolate heating, ventilation and air conditioning (HVAC) system in areas where work is being performed.

Class III: In addition to points for Class I and II:

1. Complete all critical barriers, i.e., sheetrock, plywood, plastic, or implement the control cube method [cart with plastic covering and sealed connection

- to work site with high efficiency particulate air (HEPA) vacuum for cleaning prior to exit] to seal the area before construction begins.
- 2. Maintain negative air pressure within the work site utilizing HEPA-equipped air filtration units.
- 3. Contain construction waste before transport in tightly covered containers.
- 4. Cover transport receptacles or carts. Tape covering unless the cart has a solid lid.

Class IV: In addition to points for Class I, II and III:

- 1. Relocate patients away from construction areas.
- 2. Isolate HVAC system in area where work is being done to prevent contamination of the duct system.
- 3. Seal holes, pipes, conduits and punctures appropriately.
- 4. Construct anteroom and require all construction personnel to pass through this room so they can be vacuumed using a HEPA vacuum cleaner before leaving the work site or they can wear cloth or paper coveralls that are removed each time they leave the work site.
- 5. Do not remove barriers from the work area until the completed project is inspected by the VA Safety Office and the Infection Control Coordinator, and thoroughly cleaned by Environmental Management.

2.22 Confined Space Entry

- A. Contractor will be informed that the workplace contains permit-required confined space, and that permit-space entry is allowed only through compliance with a permit space program meeting the requirements of 29 CFR 1910.146 and 1926.21(b)(6).
- B. Contractor will be apprised of the elements including the hazards identified and the Medical Center's (last employer) experience with the space that makes the space in question a permit space.
- C. Contractor will be apprised of any precautions or procedures that the Medical Center has implemented for the protection of employees in or near permit space where Contractor personnel will be working.
- D. Medical Center and Contractor will coordinate entry operations when both Medical Center personnel and Contractor personnel will be working in or near permit spaces as required by 29 CFR 1910.146(d)(ii) and 1926.21(b)(6).
- E. Contractor shall obtain any available information regarding permit space hazards and entry operation from the Medical Center.
- F. At the conclusion of the entry operations, the Medical Center and Contractor will discuss any hazards confronted or created in permit spaces.

- G. The Contractor shall be responsible for complying with 29 CFR 1910.246(d) through (g) and 1926.21(b) (6). The Medical Center, upon request, will provide rescue and emergency services required by 29 CFR 1910.246(k) and 1926.21(b)(6).